

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/566818 FILING DATE JAN 27 2006
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1	
2					1	
3			2		1	
4			8		1	
5						
6						
7						
8						
9						
10						
11			1		1	
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48						
49						
50						
TOTAL IND.					1	↓
TOTAL DEP.	←		←		5	←
TOTAL CLAIMS		↓			6	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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98						
99						
100						
TOTAL IND.					↓	
TOTAL DEP.	←		←		↓	←
TOTAL CLAIMS		↓			↓	←